

October 5, 2012

SECRETARY OF THE SENATE

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Secretary of the Senate
Office of Public Records
P.O. Box 77578
Washington, DC 20013-7578

Dear Secretary,

Please find enclosed FEC Form 1 and Form 2 for the *Mike Rounds for US Senate Exploratory Committee*. If you have any questions or need additional information, please do not hesitate to contact me at any time.

Sincerely,



Jason Glodt
109 S. Pierre St.
Pierre, SD 57501
Phone- 605.280.7767
Email- jglodt@pie.midco.net

12020714342

FEC FORM 2
STATEMENT OF CANDIDACY

| | | | | |
|---|---------------------------------|--|--------------------------|--|
| 1. (a) Name of Candidate (in full) Marion Michael Rounds | | | 2. Identification Number | |
| (b) Address (number and street) 2418 Whispering Shores Drive | | <input type="checkbox"/> Check if address changed | | |
| (c) City, State, and ZIP Code Ft. Pierre, South Dakota 57532 | | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) | | |
| 4. Party Affiliation Republican | 5. Office Sought U.S. Senate | 6. State & District of Candidate South Dakota | | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

| |
|--|
| (a) Name of Committee (in full) Mike Rounds for U.S. Senate Exploratory Committee |
| (b) Address (number and street) P.O. Box 250 |
| (c) City, State, and ZIP Code Pierre, SD 57501 |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

| |
|---------------------------------|
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

| | |
|---|---------------------|
| Signature of Candidate  | Date OCT 2, 2012 |
|---|---------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

| | | | | | | | | |
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12020714344
JASON GLOD
109 S. Pierre St
Pierre, SD 57501



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